

Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

Signal Quality Monitoring And Control For A
Medical Device System

Attorney Docket Number::

011738.00209

Request for Early Publication?::

NO

Request for Non-Publication?::

NO

Suggested Drawing Figure::

Total Drawing Sheets::

22

Small Entity?::

NO

Latin name::

Variety denomination name::

Petition included?::

NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

NO

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Mark
Middle Name:: G.
Family Name:: Frei
Name Suffix::
City of Residence:: Lawrence
State or Province of Residence:: Kansas
Country of Residence:: USA
Street of mailing address:: 2513 Via Linda Drive
City of mailing address:: Lawrence
State or Province of mailing address:: Kansas
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 66047

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Ivan
Middle Name::
Family Name:: Osorio
Name Suffix::
City of Residence:: Leawood
State or Province of Residence:: Kansas
Country of Residence:: USA
Street of mailing address:: 4005 W. 124th Street
City of mailing address:: Leawood
State or Province of mailing address:: Kansas

Country of mailing address:: USA
Postal or Zip Code of mailing address:: 66209
Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Johnathan
Middle Name:: C.
Family Name:: Werder
Name Suffix::
City of Residence:: Corcoran
State or Province of Residence:: Minnesota
Country of Residence:: USA
Street of mailing address:: 23160 Meadowview Drive

City of mailing address:: Corcoran
State or Province of mailing address:: Minnesota
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 55374
Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: David
Middle Name:: L.
Family Name:: Carlson
Name Suffix::
City of Residence:: Fridley
State or Province of Residence:: Minnesota
Country of Residence:: USA
Street of mailing address:: 141 46th Avenue NE

City of mailing address:: Fridley
State or Province of mailing address:: Minnesota
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 55421

Correspondence Information

Correspondence Customer Number:: 22908

Representative Information

Representative Customer Number:: 22908

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/503,803	09/19/03
This Application	Non-Provisional of	60/418,580	10/15/02

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Medtronic, Inc.
Street of mailing address:: 710 Medtronic Parkway NE
LC 340
City of mailing address:: Minneapolis
State or Province of mailing address:: Minnesota
Country of mailing address:: USA

Postal or Zip Code of mailing address:: 55432